

HS 59339

EFT

①
m

**MILEAGE TRAVELLED RELATING TO
THE OFFICE OF THE MINISTER
FOR EDUCATION AND SKILLS**

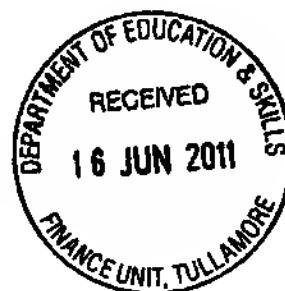
1. I certify that the mileage travelled in the period

From 3/5/11 to 31/5/11

which related to my Office as Minister at the Department of Education
and Skills was 4650 kilometres

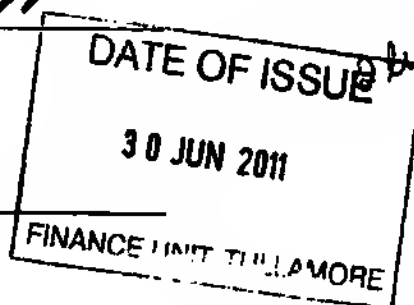
Signed: Nashia Grady
Driver

Date: 31/5/11



Signed: Ruairi Quinn
Minister

Date: 3/6/2011



2. Accountant

Please arrange for payment on the basis of the mileage certified above.

Signed: Michael Ueapf
Accounting Officer

Date: 14.6.2011

CC

16000.

4650 @ 5907 €2746.76
8 22/6

T#2 60074.

mq

EFT.

**MILEAGE TRAVELLED RELATING TO
THE OFFICE OF THE MINISTER
FOR EDUCATION AND SKILLS**

1. I certify that the mileage travelled in the period

From 1st June to 30th June

which related to my Office as Minister at the Department of Education
and Skills was 4250 kilometres

Signed: Nashie Grady
Driver

Date: 8/7/11

Signed: [Signature]
Minister

Date: 8/7/11

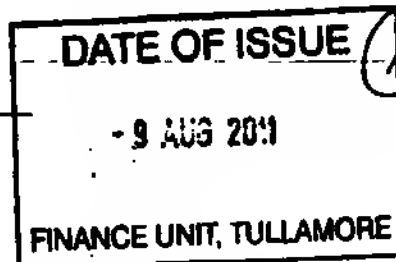


2. Accountant

Please arrange for payment on the basis of the mileage certified above.

Signed: Michele Keogh
Accounting Officer

Date: 26-7-2011



P. 1756-55

4250

1787@ 5907 = 1055.58

2463@ 2846 = 700.97

1756 55

M.D.

T+S 60505
COST CENTRE 16000
MILEAGE TRAVELLED RELATING TO
THE OFFICE OF THE MINISTER
FOR EDUCATION AND SKILLS

E.F.T.

(3)
(fue)

1. I certify that the mileage travelled in the period

From 1/7/11 to 31/7/11

which related to my Office as Minister at the Department of Education
and Skills was 5100 kilometres

Signed: Nedie Grady
Driver

Date: 1/8/11

Signed: [Signature]
Minister

Date: _____

DATE OF ISSUE
9 SEP 2011
FINANCE UNIT, TULLAMORE

$5100 \times 2846 = 1,451,46$
A.D. 01/09/2011

2. Accountant

Please arrange for payment on the basis of the mileage certified above.

Signed: Michael Keogh
Accounting Officer

Date: 29-8-2011

TOTAL: €1,451.46



M.D.

THS 60814 E.F.T. (4)

MILEAGE TRAVELLED RELATING TO

THE OFFICE OF THE MINISTER

FOR EDUCATION AND SKILLS

RUARI QUINN C.C. 16000

1. I certify that the mileage travelled in the period

From 1st August to 31st August

which related to my Office as Minister at the Department of Education and Skills was 2800 kilometres

Signed:

Driver

Date:

Signed:

Minister

Date:

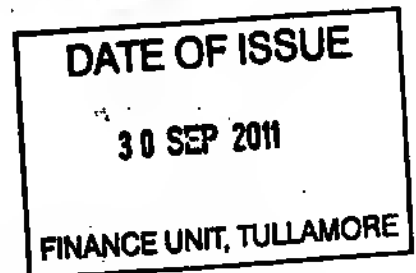
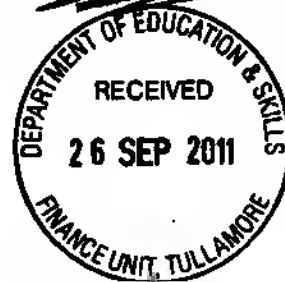
2. Accountant

Please arrange for payment on the basis of the mileage certified above.

Signed:

Accounting Officer

Date:



€796.88
~~2619~~
2619.

Must be attached to all Payment Authorisation Forms when processing.

5

For use by Corporate Services:

COPY

Supplier Number on FMS: 70942.

Checked by: [Signature]

Subhead Code: 16000.

Approved by (HEO): /J. Raham

Nominal Code: 62011035.

Date approved: 23/9/2011

Folder Number: 2.

Expiry date of TCC: NONE.

Entered on FMS by: KM/Q

Date entered: 22-9-11.

Note - check payment for:

ICAT

Withholding Tax

4th Schedule

Pay Alone flag - ticked/un-ticked? (credit notes, eircom, Xerox etc).

Novel number ✓
EPT ✓

September, 2011

Roseann Gilligan
Minister's Office

✓



11/11/11 - 0.1111
23/9/11 - 2353
- 22/9 - discussed with
D. Carroll. Drivers are
employed by Dept. We are
liable for bus. element of
car insurance policy Y.G.

Yvonne Graham, HEO, Accommodation and Services
Ronnie Ryan, Private Secretary, Minister's Office

R Ryan 16/9/11

**Re: Recoupment of cost for business use element of insurance policy
on Minister's car**

I wish to seek reimbursement direct to Minister Ruairi Quinn of €187.50
in respect of the above.

The relevant invoice is enclosed for reference.

Kind regards,


Roseann Gilligan
Minister's Office



1/11/11 - email to
22/9/11 - 2383
- 22/9 - discussed with
D. Gordon. Drivers are
employed by Dept. We are
liable for bus. element of
car insurance policy Y.G.



Mr. Ruairi Quinn,
23 Strand Road,
Dublin 4

This matter is being
dealt with by: Joe Lawler

Your ref: [REDACTED]

Date: 03/08/2011

Hi Ruairi,

The business use element of this policy amounts to a monetary sum of €187.50

Kind Regards,


Joe Lawler
Broker Department

*Private Secretary
Please arrange a refund of €187.50
for the mortgage.*

Kevin

25/09/11

ZURICH INSURANCE PLC

ZURICH HOUSE BALLSBRIDGE PARK DUBLIN 4 TELEPHONE 01 667 0666 FAX 01 667 0644 WEB WWW.ZURICH.IE

DIRECTORS: D. WENIGER (CHAIRMAN (GERMANY)) J. DESS (SWITZERLAND) T. DE SMAN (NETHERLANDS) P. BLANEY (IRELAND) E. VUOL (IRELAND)
REGISTERED IN IRELAND UNDER NO. 13460. REGISTERED OFFICE ZURICH HOUSE BALLSBRIDGE PARK DUBLIN 4

ZURICH INSURANCE PLC IS REGULATED BY THE CENTRAL BANK OF IRELAND



Ruairi Quinn TD
23 Strand Road
Sandymount
Dublin 4

JLT Ireland
Warrington House
Mount Street Crescent
Dublin 2

Tel +353 1 2026000
Fax +353 1 2376200
Email jlt@jlt.ie

www.jlt.ie

Invoice No. : 171252
Client Number : [REDACTED]

3rd August, 2011.

INVOICE

Thank you for your recent instruction and we advise that we have arranged the following insurance policy as detailed hereunder.

Policy Number: [REDACTED]
Product producer: **Zurich Insurance plc**
Cover Period: **28 JUL 11 to 27 JUL 12**
Policy Type: **(A)Private Motor**

Cover Details:

Private Motor Insurance Policy

Refer to policy for full cover details

The amount due includes the following:

- Premium: €750.00
- Government Levy included at prevailing rate

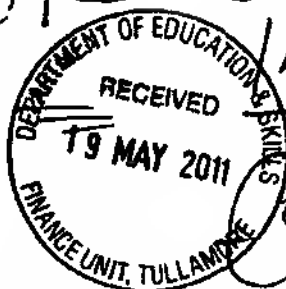
TOTAL AMOUNT DUE: €750.00

EFFECTIVE DATE: 28th July, 2011.

E. & O.E.

2

11428 - 6437 @ 5907 = 3802.34 (6)
4991 @ 2846 = 1420.44
5222.78



MILEAGE TRAVELLED RELATING TO

THE OFFICE OF THE MINISTER OF STATE

T + 5 58646

1. I certify that the mileage travelled in the period

From 11/3/2011 to 12/5/2011

which related to my Office as Minister of State at the Department of Education and Science was 11,428 kilometres

Signed: Ciaran Cannon
Minister of State CIARAN CANNON
Date: 13/5/2011
DATE OF ISSUE
25 MAY 2011
FINANCE UNIT, TULLAMORE

2. Accountant

Please arrange for payment on the basis of the mileage certified above.

Signed: Michael Keogh
Accounting Officer

Date: 17.5.2011

23/5/11

€ 5222.77

mc
19/5/11

(7)

T+S
59442

EFT.
Cob

**MILEAGE TRAVELLED RELATING TO
THE OFFICE OF THE MINISTER OF STATE**

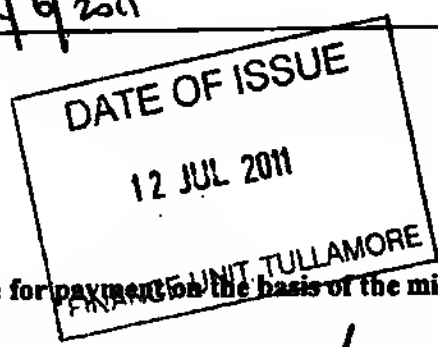
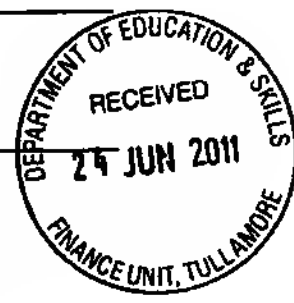
1. I certify that the mileage travelled in the period

From 13/5/2011 to 21/6/2011

which related to my Office as Minister of State at the Department of
Education and Skills was 9,090 kilometres

Signed: [Signature]
Minister of State

Date: 21/6/2011



2. Accountant

Please arrange for payment on the basis of the mileage certified above.

Signed: Michael Keogh
Accounting Officer

Date: 22-6-2011

CC
16100

9090 @ 2846 = €2587.01
we 4/7/11

(8)

THS EFT
60058 GB

**MILEAGE TRAVELLED RELATING TO
THE OFFICE OF THE MINISTER OF STATE**

1. I certify that the mileage travelled in the period

From 22/6/11 to 2/7/11

which related to my Office as Minister of State at the Department of
Education and Skills was 5609 kilometres

Signed: [Signature]
Minister of State

Date: 2/7/11

2. Accountant

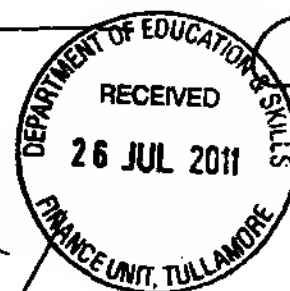
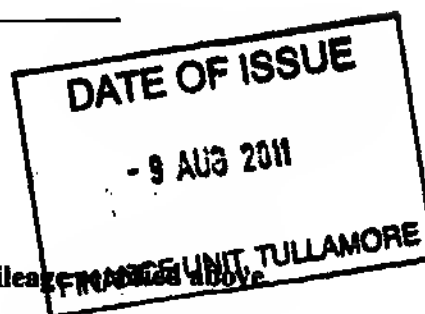
Please arrange for payment on the basis of the mileage travelled above

Signed: [Signature]
Accounting Officer

Date: 22.7.2011

5609 @ 2846 =

€ 1596.32



2/7/11

T+S
61164 EFT.
CSB

**MILEAGE TRAVELLED RELATING TO
THE OFFICE OF THE MINISTER OF STATE**

1. I certify that the mileage travelled in the period

From ²²~~27~~/9/2011 to 26/9/2011

which related to my Office as Minister of State at the Department of
Education and Skills was 9,588 kilometres

Signed: [Signature]
Minister of State

Date: 27/9/2011

DATE OF ISSUE

21 OCT 2011

FINANCE UNIT, TULLAMORE

2. Accountant

Please arrange for payment on the basis of the mileage certified above.

Signed: [Signature]
Accounting Officer



9 588 @ 2 846 = €27 28.74

[Signature]
21/11

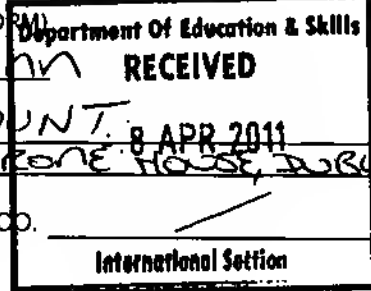
3

TRAVEL & SUBSISTENCE - FOREIGN

Date	Supplier Name	Description	Payment Method	Amount
15.03.2011	Dublin to Milan & Rome (return)	Official Business Milan & Rome	N/A	315.12
19.05.2011	Dublin to Brussels (return)	Education Council Meeting	N/A	217
15.06.2011	Dublin to Brussels (return)	Meeting with EU Commissioner	N/A	180.83
12.07.2011	Dublin to Chicago (return)	Education Conference	N/A	424.25
Total				1137.2

DEPARTMENT OF EDUCATION AND SCIENCE

(TRAVEL & SUBSISTENCE EXPENSES CLAIM FORM)



(1) NAME (BLOCK CAPITALS) MINISTER RUARI QUINN
 HOME ADDRESS: STRAND ROAD SANDYMOUNT
 OFFICE ADDRESS: DEPT OF EDUCATION & SKILLS, TYRONE HOUSE, DUBLIN 2

(2) DETAILS OF CAR (if used) ENGINE C.C. INSURANCE CO.

(3) DETAILS OF CLAIM
 PURPOSE OF JOURNEY: Official Business
(purpose of each journey should be shown)

DATE	TIME OF		JOURNEY		MODE (car or public transport)	KM	RATE KM	COST (car or public transport)	SUBSISTENCE EXPENSES (RATE)
	DEP.	RET.	FROM	TO					
15/3/11	06:00		HOME	DUBLIN AIRPORT					
			ST PATRICK'S VISIT ABROAD						
16/3/11	08:30		MILAN	ROME					
17/3/11	20:30		DEPART ROME	DUBLIN					
		23:30	ARRIVE	TO HOME ADDRESS					
SUB. TOTALS								0	0

* WHERE SUBSISTENCE IS CLAIMED EXACT TIME OF DEPARTURE & RETURN MUST BE SHOWN

2X OVERNIGHT, 1X 10 HR
 GRAND TOTAL 0

LESS IMPREST (IF ANY)

TOTAL PAYMENT 0

IF MEALS OR ACCOMMODATION WERE PROVIDED FREE OF CHARGE PLEASE GIVE DETAILS:

* 2 lunches.

(4) DECLARATION BY CLAIMANT:

I declare that:

- (a) The subsistence and other allowances that I claim are correct according to the relevant regulations.
- (b) The expenses were necessarily incurred in public services only. (c) The vouchers attached are correct
- (d) I have not claimed, nor will I claim from any Government Department, nor from any other source, the expenses incurred above during this period
- (e) The car (details above) is owned and maintained by me and is, and will continue to be, insured by me for the purposes of the Road Traffic Acts and I will advise the Department of any change to the insurance cover.

* SIGNATURE (of Claimant) Ruairi Quinn GRADE Minister DATE 24/3/11 EXTN.:
 SECTION AND LOCATION: Minister's Office

(5) APPROVAL OF CLAIM

I certify that:

- (a) The particulars furnished are correct and in accordance with relevant regulations.
- (b) The journeys were in accordance with a programme of work designed to reduce travelling to a minimum consistent with efficiency.
- (c) This claim is to be charged to COST CENTRE

SIGNATURE (of certifying officer) Michael Uoghl GRADE 29/3/2011 DATE 22/3/11 EXTN.: 2411

For use in Home Travel: Examined Cld. For payment AMOUNT €
 SUBHEAD CODE
 Date Date COST CENTRE

DEPARTMENT OF EDUCATION AND SCIENCE

(TRAVEL & SUBSISTENCE EXPENSES CLAIM FORM)

(1) NAME (BLOCK CAPITALS)

Ruairi Quinn (Minister)

HOME ADDRESS:

OFFICE ADDRESS

23 Strand Road Sandymount Dublin

(2) DETAILS OF CAR (if used)

ENGINE C.C.

INSURANCE CO.

(3) DETAILS OF CLAIM

PURPOSE OF JOURNEY:

Eu Council Meeting

(purpose of each journey should be shown)

DATE	TIME OF		JOURNEY		MODE (car or public transport)	KM	RATE PER KM	COST (incl. public transport cost)	SUBSISTENCE EXPENSES (RATE)
	DEP.	RET.	FROM	TO					
19/5	10.30AM		Dublin to Brussels						
20/5		23.00	Brussels to Dublin						
			(Conf Rate + 1/3)						
SUB. TOTALS								0	0

* WHERE SUBSISTENCE IS CLAIMED EXACT TIME OF DEPARTURE & RETURN MUST BE SHOWN

GRAND TOTAL 0

LESS IMPREST (IF ANY)

TOTAL PAYMENT 0

IF MEALS OR ACCOMMODATION WERE PROVIDED FREE OF CHARGE PLEASE GIVE DETAILS:

(4) DECLARATION BY CLAIMANT:

I declare that:

- (a) The subsistence and other allowances that I claim are correct according to the relevant regulations.
- (b) The expenses were necessarily incurred in public services only. (c) The vouchers attached are correct
- (d) I have not claimed, nor will I claim from any Government Department, nor from any other source, the expenses incurred above during this period
- (e) The car (details above) is owned and maintained by me and is, and will continue to be, insured by me for the purposes of the Road Traffic Act and I will advise the Department of any change to the insurance cover.

SIGNATURE (of Claimant)

GRADE

DATE

21/9

EXTN.:

2221

SECTION AND LOCATION:

Minister's Office

(5) APPROVAL OF CLAIM

I certify that:

- (a) The particulars furnished are correct and in accordance with relevant regulations.
- (b) The journeys were in accordance with a programme of work designed to reduce travelling to a minimum consistent with efficiency.
- (c) This claim is to be charged to

COST CENTRE

SIGNATURE (of certifying officer)

GRADE

DATE

21/9

EXTN.:

2221

For use in Home Travel:

Examined

Ctd. For payment

AMOUNT €

SUBHEAD CODE

Date

Date

COST CENTRE

3

Rodriguez Quinn. (Minister

23 Strand Rd Sandymount Dable

INSURANCE CO.

✓ Meeting with EU Commissioner in advance of Tent Procedure
(purpose of each journey should be shown)

Department of Education & Skills INFORMATIONAL SECTION	30 SEP 2011 Calculations Checked & Verified: <i>[Signature]</i> Signed: <i>[Signature]</i> (Date) <i>14/9</i>
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TOTAL PAYMENT	0
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Luann Gunn
Minister's Office

GRADE DATE 2/9 EXTN.: 2221.

Ranme Ryan

Michael Weep

HEO

GRADE **A/SEC**

DATE _____

214 EXTN.:

2221

241

COST CENTRE

DEPARTMENT OF EDUCATION AND SKILLS

(TRAVEL & SUBSISTENCE EXPENSES CLAIM FORM)

(1) NAME (BLOCK CAPITALS) Munir Waqar Qinn PPSN: _____

HOME ADDRESS: 23 Steand Road Sandymount Dublin

(2) DETAILS OF CAR (if used) ENGINE C.C. _____ INSURANCE CO. _____

(3) DETAILS OF CLAIM

PURPOSE OF JOURNEY: Educational conference Chicago USA
(purpose of each journey should be shown)

DATE	TIME OF		JOURNEY		MODE (car or public transport)	KM	RATE PER KM	COST (incl. public transport cost)	SUBSISTENCE EXPENSES (RATE)
	DEP.	RET.	FROM	TO					
12/7	5:30 AM		Dublin	Chicago					
17/7		8 AM	Chicago	Dublin	Plane				
SUB. TOTALS								0	0

* WHERE SUBSISTENCE IS CLAIMED EXACT TIME OF DEPARTURE & RETURN MUST BE SHOWN

GRAND TOTAL 0

LESS IMPREST (if any) _____

TOTAL PAYMENT 0

IF MEALS OR ACCOMMODATION WERE PROVIDED FREE OF CHARGE PLEASE GIVE DETAILS:

(4) DECLARATION BY CLAIMANT

I declare that:

- (a) The subsistence and other allowances that I claim are correct according to the relevant regulations.
 (b) The expenses were necessarily incurred in public services only. (c) The vouchers attached are correct
 (d) I have not claimed, nor will I claim from any Government Department, nor from any other source, the expenses incurred above during this period
 (e) The car (details above) is owned and maintained by me and is, and will continue to be, insured by me for the purposes of the Road Traffic Act and I will advise the Department of any change to the insurance cover.

SIGNATURE (of Claimant)

GRADE Minister DATE 28/9

EXTN.: 2221

SECTION AND LOCATION: Minister's Office

(5) APPROVAL OF CLAIM

I certify that:

- (a) The particulars furnished are correct and in accordance with relevant regulations.
 (b) The journeys were in accordance with a programme of work designed to reduce travelling to a minimum consistent with efficiency.
 (c) This claim is to be charged to

COST CENTRE

SIGNATURE (of certifying officer)

GRADE ASGC DATE 28/9

EXTN.: 2221

For use in Home Travel:

Examined Fairlie Cunningham Sd. For payment

AMOUNT €

SUBHEAD CODE

COST CENTRE

Date

Date

4

FOI 2011/957 Ken Foxe**Foreign T&S Claims for Minister of State Ciaran Cannon from date of appointment**

Document No	No of pages	Date of Claim	Description	Amount Paid
1	1	09/09/2011	T&S Claim for attending Informal meeting of EU Education Ministers in Budapest 28-29th Sept 2011	€79.31
2	1	09/09/2011	T&S Claim for ASEM Meeting in Copenhagen 8 - 11th May 2011	€78.59
3	1	06/10/2011	T&S for meetings with Malaysian & Singapore Govts 10 - 17th sept 2011	€566.99

DEPARTMENT OF EDUCATION AND SKILLS
(TRAVEL & SUBSISTENCE EXPENSES CLAIM FORM)

9

(1) NAME (BLOCK CAPITALS) CIARAN CANNON, TD PPSN: _____

HOME ADDRESS: Minister of State, Department of Education and Skills.

(2) DETAILS OF CAR (if used) ENGINE C.C. _____ INSURANCE CO. _____

(3) DETAILS OF CLAIM

PURPOSE OF JOURNEY: Attendance at informal meeting of EU Education Ministers in Budapest
(purpose of each journey should be shown)

PURPOSE OF JOURNEY:

Attendance at International Meeting
(purpose of each journey should be shown)

DATE	TIME OF		JOURNEY		MODE (car or public transport)	KM	RATE PER KM	COST (incl. public transport cost)	SUBSISTENCE EXPENSES (RATE)
	DEP.	RET.	FROM	TO					
28/03/2011	11.30		Gateway to Dublin						
	15.30		Dublin Airport to Budapest						
29/03/2011		23.00	Budapest to Dublin						
SUBSISTENCE AS APPROPRIATE								0	0

DATE OF DEPARTURE & RETURN MUST BE SHOWN

* WHERE SUBSISTENCE IS CLAIMED EXACT TIME OF DEPARTURE & RETURN MUST BE SHOWN

GRAND TOTAL 0

LESS IMPREST (IF ANY) _____

TOTAL PAYMENT 0

IF MEALS OR ACCOMMODATION WERE PROVIDED FREE OF CHARGE PLEASE GIVE DETAILS:

Dinner on 28/3/11 and breakfast and lunch on 29/3/11

(4) DECLARATION BY CLAIMANT:

I declare that:

- (a) The subsistence and other allowances that I claim are correct according to the relevant regulations. (c) The vouchers attached are correct
- (b) The expenses were necessarily incurred in public services only.
- (d) I have not claimed, nor will I claim from any Government Department, nor from any other source, the expenses incurred above during this period
- (e) The car (details above) is owned and maintained by me and is, and will continue to be, insured by me for the purposes of the Road Traffic Acts and I will advise the Department of any change to the insurance cover.

SIGNATURE (of Claimant) [Signature] GRADE _____ DATE _____ EXTN.: _____

SECTION AND LOCATION: _____

(5) APPROVAL OF CLAIM

I certify that:

- (a) The particulars furnished are correct and in accordance with relevant regulations.
- (b) The journeys were in accordance with a programme of work designed to reduce travelling to a minimum consistent with efficiency.
- (c) This claim is to be charged to COST CENTRE [Box]

SIGNATURE (of certifying officer)

[Signature] GRADE Secy DATE _____ EXTN.: _____

For use in Home Travel:

Examined

Patricia Cunningham S.O. For payment

AMOUNT € 79.31

SUBHEAD CODE _____

Date

9.9.11

Date

COST CENTRE _____

DEPARTMENT OF EDUCATION AND SKILLS
(TRAVEL & SUBSISTENCE EXPENSES CLAIM FORM)

2

(1) NAME (BLOCK CAPITALS) CIARAN CANNON TD PPSN: _____

HOME ADDRESS: Minister of State, Department of Education and Skills.

(2) DETAILS OF CAR (if used) ENGINE C.C. _____ INSURANCE CO. _____

(3) DETAILS OF CLAIM
PURPOSE OF JOURNEY: ASEM Ministerial Meeting, Copenhagen
(purpose of each journey should be shown)

DATE	TIME OF		JOURNEY		MODE (car or public transport)	KM	RATE PER KM	COST (incl. public transport cost)	SUBSISTENCE EXPENSES (RATE)
	DEP.	RET.	FROM	TO					
08/05/2011	14.30		Galway to Dublin						
	18.40		Dublin Airport to Copenhagen						
09/05/2011			Copenhagen						
10/05/2011			Copenhagen						
11/05/2011		11.30	Copenhagen to Dublin						
SUBSISTENCE AS APPROPRIATE								0	0

* WHERE SUBSISTENCE IS CLAIMED EXACT TIME OF DEPARTURE & RETURN MUST BE SHOWN

GRAND TOTAL 0
LESS IMPREST (if ANY) _____
TOTAL PAYMENT 0

IF MEALS OR ACCOMMODATION WERE PROVIDED FREE OF CHARGE PLEASE GIVE DETAILS:

See attached

(4) DECLARATION BY CLAIMANT:

I declare that:

- (a) The subsistence and other allowances that I claim are correct according to the relevant regulations.
 (b) The expenses were necessarily incurred in public services only. (c) The vouchers attached are correct
 (d) I have not claimed, nor will I claim from any Government Department, nor from any other source, the expenses incurred above during this period
 (a) The car (details above) is owned and maintained by me and is, and will continue to be, insured by me for the purposes of the Road Traffic Acts and I will advise the Department of any change to the insurance cover.

SIGNATURE (of Claimant) [Signature] GRADE _____ DATE _____ EXTN.: _____

SECTION AND LOCATION: _____

(5) APPROVAL OF CLAIM

I certify that:

- (a) The particulars furnished are correct and in accordance with relevant regulations.
 (b) The journeys were in accordance with a programme of work designed to reduce travelling to a minimum consistent with efficiency.
 (c) This claim is to be charged to COST CENTRE

SIGNATURE (of certifying officer) [Signature] GRADE Secy DATE _____ EXTN.: _____

For use in Home Travel: Examined Patricia Cunningham Ckd. For payment _____ AMOUNT € 18.59

Date 9.9.11 Date _____ SUBHEAD CODE _____ COST CENTRE _____

(TRAVEL & SUBSISTENCE EXPENSES CLAIM FORM)

CIARÁN CANNON, TD

PPSN

HOME ADDRESS: *X* Minister of State, Department of Education and Skills

(2) DETAILS OF CAR (if used) ENGINE C.C. INSURANCE CO.

* He might have travelled from Johor, to Johor, where
to his 9th Loring Park Line 8/1
Meetings with Malaysian and Singapore Government
in phone. 1/1

PURPOSE OF JOURNEY: Meetings with Malaysian and Singapore Government

(purpose of each journey should be shown)

DATE	TIME OF		JOURNEY	MODE (car or public transport)	KM	RATE PER KM	COST (incl. public transport cost)	SUBSISTENCE EXPENSES (RATE)
	DEP.	RET.						
10-17 Sep	05:00	13:00	Dublin-Kuala Lumpur-Singapore-					
			Dublin: T&S as appropriate					
						SUB. TOTALS		

* WHERE SUBSISTENCE IS CLAIMED EXACT TIME OF DEPARTURE & RETURN MUST BE SHOWN

GRAND TOTAL
LESS IMPREST (IF ANY)

TOTAL PAYMENT

IF MEALS OR ACCOMMODATION WERE PROVIDED FREE OF CHARGE PLEASE GIVE DETAILS:

(4) DECLARATION BY CLAIMANT:

I declare that:

- (a) The subsistence and other allowances that I claim are correct according to relevant regulations.
- (b) The expenses were necessarily incurred in public services only. (c) The vouchers attached are correct.
- (d) I have not claimed, nor will I claim from any Government Department, nor from any other source, the expenses incurred above during this period.
- (e) The car (details above) is owned and maintained by me and is, and will continue to be, insured by me for the purposes of the Road Traffic Acts and I will advise the Department of any change to the insurance cover.

SIGNATURE (of Claimant)

GRADE

DATE _____

EXTN:

SECTION AND LOCATION:

(5) APPROVAL OF CLAIM

I certify that:

- (a) The particulars furnished are correct and in accordance with relevant regulations.
- (b) The journeys were in accordance with a programme of work designed to reduce travelling to a minimum consistent with efficiency.
- (c) This claim is to be charged to COST CENTRE

COST CENTRE

SIGNATURE (of certifying officer)

GRADE

DATE _____

EXTN.:

For use in Home Travel:

Examined

Cld. For payment

AMOUNT €

Date _____

Date _____

SUBHEAD CODE

COST CENTRE

TRAVEL & SUBSISTENCE - HOME

Date	Supplier Name	Description	Payment Method	Amount
15.09.2011	Dublin to Cork (return)	IVEA Congress	N/A	33.61
Total				33.61

DEPARTMENT OF EDUCATION AND SCIENCE

(TRAVEL & SUBSISTENCE EXPENSES CLAIM FORM)

(1) NAME (BLOCK CAPITALS)

RAIRI QUINN

HOME ADDRESS:

23 STRAND RD., SANDYMOUNT, DUBLIN

OFFICE ADDRESS

(2) DETAILS OF CAR (if used)

ENGINE C.C.

INSURANCE CO.

(3) DETAILS OF CLAIM

PURPOSE OF JOURNEY:

IVEA CONGRESS, CORK

(purpose of each journey should be shown)

DATE	TIME OF		JOURNEY		MODE (car or public transport)	KM	RATE PER KM	COST (incl. public transport cost)	SUBSISTENCE EXPENSES (RATE)
	DEP.	RET.	FROM	TO					
15/9	9:00	24:00	DUBLIN - CORK	CORK - DUBLIN	—	—	—		33.61
SUB. TOTALS									0

* WHERE SUBSISTENCE IS CLAIMED EXACT TIME OF DEPARTURE & RETURN MUST BE SHOWN

GRAND TOTAL

0

LESS IMPREST (IF ANY)

TOTAL PAYMENT

33.61⁰

IF MEALS OR ACCOMMODATION WERE PROVIDED FREE OF CHARGE PLEASE GIVE DETAILS:

(4) DECLARATION BY CLAIMANT:

I declare that:

- (a) The subsistence and other allowances that I claim are correct according to the relevant regulations.
 (b) The expenses were necessarily incurred in public services only. (c) The vouchers attached are correct
 (d) I have not claimed, nor will I claim from any Government Department, nor from any other source, the expenses incurred above during this period
 (e) The car (details above) is owned and maintained by me and is, and will continue to be, insured by me for the purposes of the Road Traffic Acts and I will advise the Department of any change to the insurance cover.

SIGNATURE (of Claimant)

Rairi Quinn

GRADE

DATE

EXTN.:

SECTION AND LOCATION:

MINISTERS OFFICE

(5) APPROVAL OF CLAIM

I certify that:

- (a) The particulars furnished are correct and in accordance with relevant regulations.
 (b) The journeys were in accordance with a programme of work designed to reduce travelling to a minimum consistent with efficiency.
 (c) This claim is to be charged to COST CENTRE

SIGNATURE (of certifying officer)

GRADE

DATE

EXTN.:

For use in Home Travel:

Examined

Cld. For payment

AMOUNT €

SUBHEAD CODE

Date

Date

COST CENTRE

6

ENTERTAINMENT				
Date	Supplier Name	Description	Payment Method	Amount
23.06.2011	Houses of the Oireachtas	Hosted lunch for Chinese Ambassador and delegation	Laser	149
Total				149

BUSINESS BREAKFASTS/LUNCH MEETINGS

Date	Supplier Name	Description	Payment Method	Amount
20.04.2011		Business breakfast meeting with Sean Flynn	Cash	13.7
21.04.2011		Business breakfast meeting with Catherine Donnelly	Cash	11.55
24.05.2011		Business breakfast meeting with Daithi O'Ceallaigh	Cash	10.5
09.06.2011		Business lunch meeting with Lord Putnam	Cash	47.35
14.06.2011		Business lunch meeting with Minister for Higher Ed Saudi Arabia	Cash	23.6
15.08.2011	Meet Meat, Rue Stevin straat, Brussels	Business dinner with John Bell, Chef de Cabinet	Laser	129.8
20.06.2011	Houses of the Oireachtas	Business lunch with Professor Brian McCraith, DCU	Laser	39.1
23.06.2011	Buswells Hotel, 25 Molesworth Street	Business breakfast with Paul Kehoe, RIAI	Laser	20
08.07.2011	Gresham Hotel, 23 O'Connell Street	Business breakfast with Professor Ellen Hazelkorn	Laser	7.9
08.07.2011	Houses of the Oireachtas	Business lunch with Ciaran O'Mara	Cash	37.9
15.07.2011	Mid America Club, Chicago	Business dinner with Tom Meagher	Laser	25
18.07.2011	Gresham Hotel, 23 O'Connell Street	Business breakfast with Catherine Byrne and John Walshe	Laser	35.9
26.07.2011	Spar	Business breakfast meeting with officials	Cash	5.89
20.08.2011	Dail Restaurant, Leinster House	Business lunch with Professor J. Browne, NUIG	Cash	34.95
29.08.2011	Chez Max, 133 Lower Baggott Street	Business lunch with Sean O'Laoire re schools inventory project	Laser	17.8
13.09.2011	Gresham Hotel, 23 O'Connell Street	Business breakfast with Prof. Desmond Fitzgerald, UCD	Visa	23.9
23.09.2011	Dail Restaurant, Leinster House	Business lunch with Martin Heffernan & Michael Sammon	Cash	66.25
04.10.2011	Buswells Hotel, 25 Molesworth Street	Business breakfast with Kieran Flynn, ACCS	Visa	20
06.10.2011	Brussels	Business dinner with Jim Murray ex CEO BEUC	Cash	49.5
18.10.2011	Buswells Hotel, 25 Molesworth Street	Business breakfast with Nora Gibbons and Fergus Finlay, Barnardos	Cash	11.55
21.10.2011	Gresham Hotel, 23 O'Connell Street	Business breakfast with Shiela Nunan	Cash	7.9
Total				640.04